

GREASE APPLICATION

revised November 21,2013

1. BUILDING PERMIT AP	PLICATION NUMBER:	
2. New business? Yes / No	3. Renovation to an existing facility? Yes / No	
4. Is a food prep and/or clean up	p area affected? Yes / No	
5. Name of business:		
7. Address:	8. Contact Person:	
City:	Zip Code:	9. Phone # <u>'s:</u>
Authorized Construction Con	itact:	-
10. Name: (Mr) (Ms)		11.Title:
12.Phone # <u>:</u>	Email address:	
FACILITY INFORMATION		
	14. # of Employees:	15. Approximate # of meals served/day:
17. KITCHEN FIXTURES	How many of each are present?	
#	#	#
3 Compartment Sink	Floor sink	Wok
2 Compartment Sink	Floor Drains	Fryer(s)
Hand Sink	Mop Sink	Range
Dishwasher	Disposal	Grill
Pre-Rinse sink	Stove/Oven_	Other:
Grease Control Equipment	*Pofor to Instruction Cover sheet for min	nimums or website provided below
*See website for assistance:	*Refer to Instruction Cover sheet for mir	illiums, or website provided below
	Services/Environmental-Compliand	
••		ptor 2)above ground trap 3)in-floor trap
19. Size of proposed grease cor OR static capacity gallons Other:	ntrol equipment? 1000	GPM /Pounds (lb.) (trap)
20. Attach copy of menu. plun	nbing plans, equipment list, kitch	nen layout, general floor plan, and

20. Attach copy of menu, plumbing plans, equipment list, kitchen layout, general floor plan, and specification of grease control equipment; include make/model/manufacturer and installation detail.

21. Send to: ECO@Nashville.gov Fax: 615-862-4581

Mail to: Metro Water Services, 1360 County Hospital Road, Nashville, TN 37218